

UNITED STATES DISTRICT COURT  
WESTERN DISTRICT OF WASHINGTON  
AT SEATTLE

STATE OF WASHINGTON, et al.,

NO.

## Plaintiffs,

DECLARATION OF JEFFREY G.  
OJEMANN, MD

V.

DONALD J. TRUMP, in his official capacity as President of the United States of America, et al.,

## Defendants.

1 I, Jeffrey G. Ojemann, declare as follows

2 1. I am over the age of 18, competent to testify as to the matters herein, and attest to  
 3 the information set forth below through personal knowledge as well as through Seattle Children's  
 4 Hospital, inclusive of Seattle Children's Research Institute, ("Seattle Children's") personnel who  
 5 have assisted me in gathering this information from our institution.

6 2. I am currently Senior Vice President, Chief Physician Executive at Seattle  
 7 Children's. I have held this position since September 2024. In my role as Chief Physician  
 8 Executive, I am accountable for Seattle Children's quality, safety and medical staff programs as  
 9 well as for the development of clinical models, provider support programs and provider growth  
 10 plans needed to support Seattle Children's mission to provide hope, care and cures to help every  
 11 child live the healthiest and most fulfilling life possible.

12 3. Prior to my appointment as Seattle Children's Chief Physician Executive, I served  
 13 as Seattle Children's Chief Medical Officer, and prior to that role I served as its Surgeon-in-  
 14 Chief. Since 2019, I have been a member of Seattle Children's executive leadership team  
 15 reporting directly to Seattle Children's Chief Executive Officer. I served for more than 10 years  
 16 as the head of the division of neurosurgery at Seattle Children's before my Surgeon-in-Chief  
 17 role.

18 4. I earned my medical degree and completed a residency in neurosurgery and a  
 19 fellowship in pediatric neurosurgery at Washington University School of Medicine in St. Louis.  
 20 I am board-certified in Neurological Surgery and in Pediatric Neurological Surgery. I have been  
 21 a member of Seattle Children's medical staff with clinical privileges since 2003. I am currently  
 22 an attending physician in Neurosurgery at Seattle Children's and previously served as co-director  
 23 of its Neuroscience Center.

24 5. In addition to my clinical practice, I am a Professor and Vice-Chair for Research  
 25 in Neurological Surgery at the University of Washington School of Medicine. I am extensively  
 26 involved in clinical research, with current interests that include brain wave correlates of motor

1 behavior, brain control of robotics, functional MRI in children, and using brain stimulation for  
 2 mapping and encouraging recovery of function. My clinical research has been funded in part by  
 3 the National Institutes of Health (NIH) and the National Science Foundation (NSF) through  
 4 various grants spanning more than 20 years, through the present.

5 **Research & Education Grants at Seattle Children's**

6. At the heart of Seattle Children's mission to provide hope, care and cures for  
 7 children lies a commitment to relentless innovation. Seattle Children's through its Research  
 8 Division leads this charge, working every day to drive scientific discoveries, foster  
 9 groundbreaking therapies, and ultimately, equip clinicians with life-changing treatments for their  
 10 patients. At Seattle Children's, research is not confined to the lab--- it's woven into the clinical  
 11 care and support that our patients and families experience.

12. Seattle Children's robust research program includes more than 375 faculty  
 13 investigators and nearly 100 postdoctoral scholars in our Research Division. Researchers at  
 14 Seattle Children's explore nearly every aspect of pediatric health and disease, from bench  
 15 research to clinical trials, including research in childhood cancer and blood disorders;  
 16 immunotherapy; infectious diseases; neurological disorders; child health, behavior and  
 17 development; respiratory diseases and translational research. Our researchers work relentlessly  
 18 to discover innovative solutions to many of the barriers that our patients face. The knowledge  
 19 gained through our research influences the innovative care we give our patients at Seattle  
 20 Children's.

21. Seattle Children's research is funded in large part by federal funds. In 2024,  
 22 Seattle Children's was awarded nearly \$185 million in federal research grants. Seattle Children's  
 23 ranks among the top four pediatric academic research institutions in the country to receive  
 24 National Institutes of Health (NIH) funding, receiving nearly \$140 million in direct funding and  
 25 over \$22 million through subawards in 2024. In addition, in 2024 the U.S. Department of Health  
 26 and Human Services provided over \$10 million in direct and subaward funding. Other critical

1 sources of federal funding for research at Seattle Children's include the National Science  
 2 Foundation and U.S. Department of Labor, among others, which provided a total of \$12 million  
 3 in research funding through direct grants and subawards in 2024.

4       9. Seattle Children's federally funded research has contributed significantly to  
 5 improved outcomes for children across the country. For example, our federally funded research  
 6 has led to the development of therapies that have dramatically increased the life expectancy of  
 7 patients with cystic fibrosis. It has also led to novel treatments for pediatric cancer patients  
 8 through immunotherapy. In addition, our federally funded research has contributed significantly  
 9 to the understanding of pediatric diseases, such as genetic diseases and Type I diabetes, which  
 10 is leading to targeted treatments for pediatric patients. In short, the federally funded research  
 11 conducted at Seattle Children's has been life-changing for countless children.

12      10. Federal funding for research at Seattle Children's helps us support and accelerate  
 13 the bench to bedside continuum and translate research into treatments, best practices, therapies,  
 14 and medical devices that ultimately improves the outcomes in pediatric health.

15      11. In addition to our research focus, Seattle Children's is a teaching institution  
 16 affiliated with the University of Washington School of Medicine. Seattle Children's serves as  
 17 the education and training site for the School's Department of Pediatrics and is the primary  
 18 teaching site for clinical training of the School's residents, fellows, and medical students in  
 19 pediatrics and pediatric specialties. Like other children's hospitals that provide graduate medical  
 20 education, Seattle Children's receives federal funding from the Children's Hospitals Graduate  
 21 Medical Education ("CHGME") Program. These critical funds offset approximately 10% of the  
 22 overall cost associated with providing high quality graduate medical training to more than 1,000  
 23 residents and fellows who rotate through Seattle Children's each year. In our current fiscal year,  
 24 we are expected to receive over \$10 million in CHGME funding. This funding supports the  
 25 training of the next generation of pediatric physicians who will ultimately care for children  
 26 across the country.

1           **Familiarity with the Executive Order and Its Harmful Effects**

2           12. I have read the Executive Order “Protecting Children From Chemical and  
 3 Surgical Mutilation” that was issued on January 28, 2025 (the “Executive Order”). Seattle  
 4 Children’s is concerned with the harmful effects of the Executive Order, including but not  
 5 limited to Section 4, which directs federal departments and agencies that provide research and  
 6 education grants to medical institutions like Seattle Children’s to immediately take steps to  
 7 ensure that institutions like us cease providing gender affirming care services.

8           13. If the federal government were to stop providing all research and education grants  
 9 to Seattle Children’s, the impacts would be devastating. An immediate federal funding cut would  
 10 impact approximately 300 grants that are currently underway. This would disrupt critical  
 11 research in areas such as pediatric oncology and blood disorders, pediatric respiratory diseases,  
 12 pediatric cardiology, pediatric mental and behavioral health, pediatric neurologic disorders  
 13 including seizures. It would also impact the approximately 13 grants that Seattle Children’s has  
 14 received approval for but have not yet been funded, including research in genetics, obesity,  
 15 pediatric oncology, asthma and respiratory failure.

16           14. A cessation of all federally funded support for Seattle Children’s research and  
 17 training activities would pose an existential threat to our institution as research is core to our  
 18 mission. We would no longer be able to attract top faculty to Seattle Children’s, and our national  
 19 reputation would be irreparably harmed. In addition, our ability to support the training of the  
 20 next generation of physicians and researchers would be negatively impacted. Most devastating,  
 21 however, would be the impacts to the children of Washington, Alaska, Montana and Idaho, our  
 22 primary service area, who rely on us as one of the nation’s very best places to care for children  
 23 and as the top-ranked pediatric hospital in Washington and the Pacific Northwest. Indeed, the  
 24 impact would be experienced by children across the U.S. as many children, adolescents and  
 25 young adults with various conditions travel from all over the country to take part in research  
 26

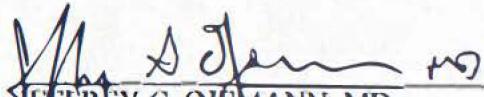
1 studies of new investigational options only available through Seattle Children's Research  
 2 Institute.

3 15. I am not aware of Seattle Children's having ever received federal grant funding  
 4 contingent upon Seattle Children's *not* providing its patients a particular type of medical  
 5 treatment or medical care. Indeed, I am not aware of this type of funding condition having ever  
 6 been placed on Seattle Children's.

7 16. The Executive Order has created an emergency situation at Seattle Children's.  
 8 We are facing immense pressure from the federal government to stop providing gender-affirming  
 9 care. This pressure is mounting as we hear of other facilities in parts of the country that have  
 10 decided to pause or discontinue care. We are experiencing panicked calls, emails, and visits from  
 11 patients and families who are scared to lose their access to gender-affirming health care. These  
 12 families are anxious about what a loss of this care would mean to their young family member's  
 13 mental health, physical health, and safety. Seattle Children's is caught in this emergency because  
 14 of the Executive Order, and without relief from a court we are unsure how this emergency will  
 15 resolve.

16 I declare under penalty of perjury under the laws of the Washington and the United States  
 17 of America that the foregoing is true and correct.

18 DATED this 5th day of February 2025, at Seattle, Washington.

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 21 JEFFREY G. OJEMANN, MD  
 22 SVP and Chief Physician Executive  
 23 Seattle Children's Hospital  
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